NRS Data Quality Monitoring Matrix

DATE: _____

INSTITUTION: _____

1. Goal Setting and Orientation	

Criteria	Evidence	
*There is a procedure to orient students and help them set goals	Yes No	
o Short and long term goals are identified.	Yes No	
o Instructional goals are identified	Yes No	
o NRS Goals are identified	Yes No	
o A realistic timeline for each goal is established.	Yes No	
*Random file review reveals that student goals are entered correctly both in IMAS and on the student intake form for both goals upon entering and follow-up of goals.	Yes No	
*A face-to-face meeting with advisor or intake personnel is documented and instructional placement is in agreement with correct assessment.	Yes No	
Monitoring focus Student Goal-setting documents reviewed , Orientation and advising plan documented and includes time frames regarding goals, the addressing of barriers, follow-up form regarding support service referral or assistance.		

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2. Testing Area		
Criteria	**Evidence**	**Comments**
• Testing is done in accessible and appropriate spaces. (quiet, well-lit, distraction-free, free of architectural and programmatic barriers)	Yes No	
• Accommodations are provided for students with documented disabilities	Yes No	
Monitoring focus		
Visit typical testing area		

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3. Trained staff		
Criteria	**Evidence**	**Comments**
• Staff who will administer assessment/s have been trained (TABE/CASAS) by a state approved trainer and in accordance with state Assessment Policy.	Yes No	
o Assessment directions and procedures are followed.	Yes No	
o Assessments are timed.	Yes No	
o Test administrators do not provide "help" (give answers, hints, etc.) to students.	Yes No	
o Instructors do not discuss test items with students.	Yes No	
o A list of Assessment trained staff is on file.	Yes No	
• The local testing schedule is adequate for both the main Center and outreach sites	Yes No	
• The local assessment training design is acceptable.	Yes No	
Monitoring focus Observe testing session for TABE and CASAS Review Assessment training design Review Assessment training schedule Review Assessment trained staff list		

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	Evidence	Comments
4. TABE/CASAS		
Criteria		
• An assessment Appraisal is administered to determine program eligibility and select appropriate pre-test.	Yes No	
• The assessment Appraisal is never used in lieu of a pre-test.	Yes No	
• Appropriate assessments are provided to students who test out in one level and may require further assessment to accurately place he/she in instruction.	Yes No	
Monitoring focus Student file review and IMAS review to ensure appraisals and correct assessments have been administered and placement aligns with assessment.		

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5. Assessment Pre-Testing		
Criteria • TABE/CASAS tests are given when students enter the program quarter and no later than within two weeks upon program entry. **Monitoring focus** Student file review.	**Evidence** Yes No	**Comments**

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6. *Assessment Post-test*		
Criteria	**Evidence**	**Comments**
• Students are not post-tested in areas they have not studied.	Yes No	
• All post-testing follows the standard timeframes and guidelines posted for each assessment in the Idaho Assessments Policy Guidelines.	Yes No	
• Early leavers are tested whenever possible and within accepted guidelines.	Yes No	
• Attendance records are consistent with NRS requirements		

o attendance is recorded for individual students appropriately
    o hours are rounded correctly
    o only legitimate activities are counted
	Yes No
	Yes No
	Yes No	

* If post-testing has been conducted prior to the 60-70 hour Idaho Assessment Policy requirement but within the acceptable minimum of 40 hours of instruction, is there documentation that includes the program manager's signature posted in a documentation binder explaining why this was done and approved?	Yes No	
• What percentage of testing exceptions are currently on file and is the program adhering to the policy of using the exception rule only for "rare" cases.	Yes No	
Monitoring focus Document Review, student file review, review binder for test exceptions, attendance records.		

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	Criteria	Evidence	Comments
7. *Students with Disabilities*			
	Criteria	**Evidence**	**Comments**
	• Students with disabilities are not exempted from testing.	Yes No	
	• Test modification written request forms are on file.	Yes No	
	• Students who request test modifications are provided with test modifications as stated in the testing policy guidelines.	Yes No	
	Monitoring focus Student File Review and interviews with assessment staff		

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8. Test Security		
Criteria	**Evidence**	**Comments**
• Program has a system in place for safeguarding, distributing, and collecting all testing materials.	Yes No	
○ On main campus, materials are maintained in a locked cabinet or locked room with limited access.	Yes No	
• Completed answer sheets are secured prior to transport to the main site	Yes No	
• Testing materials are not duplicated.	Yes No	
• There is an inventory of test materials.	Yes No	
• Appraisal answer sheets have been removed from files(regulation of CASAS but good policy for all assessment).	Yes No	

Monitoring focus
 	
Interview Director, tester/s and staff who conduct assessment
Visit testing materials security area
   Observe locking file cabinet
   Observe answer sheet storage
   Review Test Inventory		

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9. Adult Secondary Programs (GED, HSC)		
Criteria	**Evidence**	**Comments**
• Post-tests are used to determine level completion for federal accountability purposes.	Yes No	
• GED and HSE specific assessments, to include GED pre-tests, are not used to determine level completion for federal accountability purposes.	Yes No	
Monitoring focus Interview Assessment Staff and review student files		

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IMAS and Data Collection
10. Overview of Data Collection System

Criteria	Evidence	Comments
• There is a clear written or graphic description of the data collection process for each site. Data trail followed.	Yes No	
• Individual staff roles in data collection are in writing and included in the program's plan.	Yes No	
• Data collection responsibilities are included in job descriptions.	Yes No	
Monitoring focus Review Data Collection flowchart (including outreach) Review written identification of staff roles Review job descriptions		

NRS Data Quality Monitoring Matrix

	Evidence	Comments
11. Data Collection Forms		
Criteria		
• The state's standard data intake collection forms are used.	Yes No	
• A privacy of information is included on the intake form and student information is not shared when a student chooses not to agree that records may be shared by not signing the statement.	Yes No	
• The data collected on the intake form matches the information recorded in IMAS.	Yes No	
Monitoring focus		
Interview Director, coordinators and data collection staff Review data collection form		

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	Criteria	Evidence	Comments
12. Data Checking System			
	• There is a data checking/data quality system in place.	Yes No	
	o There are specific written staff assignments for		
	▪ data entry	Yes No	
	▪ data checking and quality control	Yes No	
	o Data entry occurs daily and /or weekly and is posted bi-weekly according to the state schedule.	Yes No	
	o There is an organized method to identify and correct errors, find missing data, anomalous data, or data that doesn't make sense.	Yes No	
	o Data checkers have authority to work with other staff for clarification, to correct problems and resolve errors.	Yes No	
	o There is a regular, prescribed data-checking schedule with clear deadlines.	Yes No	
	o Time is provided for staff to correct errors or input data	Yes No	
	o The program manager has a regional monitoring schedule to ensure compliance with NRS and State regulations from staff	Yes No	
	Monitoring focus		
	Observe data entry, demonstration by data person entering data, schedule of internal monitoring, interview with staff.		

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The elements that were out of compliance (those marked "No") were discussed with me. I was told that an action plan will be required to explain how the out-of-compliance items will be corrected. I was provided with a template to use in developing the program's corrective action plan. I was told that the action plan will be due two weeks from the receipt of the monitoring visit report by e-mail, with a mailed hard copy of the plan. I was told that the corrective actions need to be completed within four weeks of the receipt of the action plan e-mail (six weeks from the program's receipt of the monitoring visit report). I also understand that a second review visit may be scheduled to follow-up on corrected measures.

_____

Program Director: _____

State ABE Director:_____

Date:_____